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H. T. WEBSTER, M. D., EDITOR.

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ADDRESS DELIVERED AT THE GRADUATING EXERCISES OF THE CALIFORNIA MED- ICAL COLLEGE, NOV. 26, 1889.

BY PROF. WILLIAM C. FLINT.

At a time like this it is always expected that at least a few words will be spoken by some member of the faculty. It may not have been a happy thought for the class to make me the chosen one. We assume that the feelings of pride and interest, held dear by the members of this faculty, in the students whose connection with the college this night ceases, are reciprocated by feelings of respect and appreciation in the minds and hearts of the members of this class, and a desire would naturally be expected to exist on the part of the latter, that a fair, not feeble, representative of the faculty should speak for it in public. Pressed by other duties, I have improved only the opportunity offered by an hour in which to note down thoughts which may properly be expressed on an occasion of this kind.

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After three long years of patient and industrious study and preparation, eight students are to receive to-night the evidence of their qualifications to practice medicine and surgery. They go forth from the college, not to cease their study, not to think that they have mastered the science, not having been taught that the knowledge acquired by them already is all that there is to the great profession which they are to pursue the practice of, but they go out having been made to feel that their studies have but just commenced; that they must, by close application and careful observation, continue their medical education, and that their three years of training have given them only a foretaste of the life effort necessary to fully fit them to relieve the sick and alleviate suffering.

These eight persons are not to receive the indorsement of this institution to-night simply because of their long devotion to the studies in which they have been so carefully guided during the last three years of their lives, but because, as a result of this training, they now possess sufficient skill and learning in the art and science to entitle them to commence the actual and active practice of their chosen profession.

It is a commendable rule of the California Medical College which forbids the issuance of a diploma to any person, however competent or skillful, until the expiration of three years of actual, earnest scholarship, and only then upon passing a satisfactory examination, which these students considered as unnecessarily strict and severe. We believe that the course in a medical college cannot be made too strict, or the examinations too severe. The college term instead of three years might well be extended to four years, and we would be in favor of a State law visiting upon the individual members of a faculty penal punishment for issuing to an incompetent student the false evidence of his qualifications to practice medicine. First let the faculty itself be possessed of the skill and knowledge required to teach and train others, and then hold it to a strict accountability of the manner in which it exercises its power and discretion in granting diplomas.

The handing of the "sheep-skin" to the graduate is not a

mere form without importance or effect, but it constitutes the evidence with which its possessor is enabled to establish himself in the community as a trustworthy man, and a physician to whose judgment and skill human health and human life may be safely intrusted. Without this certificate he is prohibited by the laws of the land from even representing himself to be a physician, and with it he takes his place as a member of a most hallowed profession, one in which its members bear perhaps the closest and tenderest relations to the home and the family of any of the professions, unless it be possibly that one which sends out the spiritual adviser. Therefore, we say institutions should be selfish with their diplomas, and see to it that they are not bestowed upon the unworthy or the incompetent.

I remember when I was a younger man than at present, and ambitious to obtain a diploma which would entitle me to practice law, a young friend of mine, also ambitious in the same direction, informed me that he intended to escape the weary monotony of office study by attending a course of lectures for a single winter, at an alleged preparatory school, and thus obtain a diploma which would insure his admission to the bar without examination, and entitle him to practice law in any State in the Union. He said that he could do it, and he kept his word. Attendance at one lecture a week, no examination, and the payment of \$70 in cash, gratified his ambition and placed him in possession of the "sheep-skin." He advised me to do likewise, but I am grateful to my Creator for the strength of character and manhood which enabled me to then say, and ever since that time to say, "Let me stand upon my *merit* or let me fall."

I read not long ago of the arrest of a man in one of the New England States for having issued diplomas from seven different medical colleges which had no existence except in the mind of the imposter himself. The prices of these diplomas in the market was not stated, but a low rate must have influenced their issuance, because they could be ordered from a distance by mail without extra charge, and probably by telephone also, like divorces in the city of Chicago.

I think that I am justified in saying that legitimate and deserv-

ing seminaries of learning do not receive that degree of popular respect and encouragement to which they are entitled. It is true there are some of these institutions that are conducted by their promoters with purely mercenary motives. This is wrong, and such an academy, institute, or college is not worthy of the assistance or support of the public. How can it be expected that a teacher can properly impart to the pupil a knowledge of that which is useful and good, if the mind of the teacher is warped and narrowed into a channel through which flows only a selfish desire to make money and become rich? How can it be expected that the head of an institution whose sole consideration is pecuniary gain and profit, will select a corps of trainers and educators with reference to their qualifications and fitness for the duties expected of them in their position? The only thought which would influence their selection would be that of the amount of salary to be paid; and so by such management and such institutions in the educational world the standard is brought down, and colleges and seminaries of merit thereby suffer. Professors, teachers, and educators should receive good compensation in return for their time and talents, but this should not be the consideration.

Theological seminaries are frequently favored by bequests of wealthy men, and institutions for legal learning are sometimes similarly endowed. We have a grand example of it in the Hastings' Law School of our own city, which shines forth as the glorious evidence of the characteristic magnanimity and philanthropy of a Californian. But as a rule, medical colleges are obliged to look to their own individual efforts to raise sufficient funds to keep the interest on the mortgage paid, and not only this, but actual opposition is placed in the way of their scientific progress. There is a horror caused by the thought of the dissecting-room, which makes the presence of a medical college in any locality objectionable to a certain class of persons. I presume that imagination sometimes leads the weak minds of those of this class residing in close proximity to a medical college, to see skulls and skeletons in every door and window, and grim and ghastly ghosts and ghouls upon the roof and all round about

the building, all this because a lifeless body has been privately and decently used there in the advancement of anatomical science. It is unnecessary for me to say that this class belongs to the superstitious and ignorant quality of mankind. It is composed in part of beings of such broad scope of intellect as to fit them only to mix mortar and carry the hod—who, when they register to vote, always say, "Just write my name and I'll make my mark." Most of them don't know the difference between a seminary of learning and a county jail, unless it be by reason of their experience at the latter institution.

And then I learn from the public press that some of the women, who form also a part of this class, are offended at the presence of a medical college in their midst. The poor creatures! I pity them in their troubles. One of the many weaknesses of the speaker is an excessive sympathy for the ladies whose feelings are injured or dignity hurt. In our city it seems that we have a few women whose sense of smell is so refined that they are driven from their homes by the offensive gases and odors which arise or emanate from a new medical college building, before a single subject has been taken there for dissection. Others are so sensitive that they are rendered sick by the overpowering effects of the smoke and smell caused by the burning of human bones and flesh, which were never burned, arising from a new building in which there is not a furnace or stove, a stove-pipe or a flue. And these same women are so delicate and tender that it is almost impossible to distinguish between the smell of the pork and cabbage dinner which they prepare for their own food, and the odor of a city sewer in dry weather. So we say to the intelligent, Keep down prejudices and superstitions and give the medical college a show.

We think the *first* qualification necessary to render a person eligible for the medical profession is a strong manhood and strict and unyielding integrity. Without these traits he can never fully fill the place intended for him. As we have said, the true physician occupies a close and tender relation to the family and the home. Present when the child first breathes the air, he is later on also present at the bedside of the youth when he closes

his eyes upon the world forever. All along, the health and the lives of the little ones, and all the members of the family, are placed in the care and keeping of the medical adviser. A most sacred relation, the most responsible of human trusts. The arrangement of nature provides for the protection, perhaps only by an overhanging leaf, of the bird, as she sits upon the nest on the swinging bow of yonder tree, sheltering her little ones from the rain and the cold and the storm, and there she remains with the sweet satisfaction of feeling secure, and that the same nature which has sent the rain to fall and the wind to blow, will protect even the sparrow, and that however severe the storm may be, her nestlings will be safe under her wing, and that no harm shall come to them. When danger approaches our households, and sickness threatens, we are weak in our own strength, and we do not feel the security of the wild bird; we at once send for the doctor, and we surrender our opinions to his, and surrender ourselves entirely to his care, having the confidence that his skill and his judgment will be sufficient to thwart the attack of disease, and bring us back to health. How great that confidence, and how easily it might be disappointed!

The safe physician must possess conscience with his skill, manhood with his science, and integrity in his practices. We would not object to a proposition to require certain advanced educational qualifications as a pre-requisite to entering a medical college, but after all, a *thorough* medical education comprehends this. It is not so much the general education of the practitioner that makes him successful as it is the possession of a sound discretion and good judgment, which he can exercise on all occasions. These great gifts, possessed by so few, aided by a complete medical education, are worth more in the treatment of disease and the relief of suffering than the possession of the highest classical accomplishments ever achieved by man. The professional world contains too much theory and too little simple, unglossed common sense.

Medical practitioners as a rule are not avaricious. They are possessed of a commendable ambition to gain name and fame, but are generally satisfied with an income sufficient to meet their

monthly expenses. My observations lead me to believe that the average doctor appreciates a large business, although not comparatively remunerative, more than a small but lucrative practice. There may be a little vanity in the average doctor, the same as is found in most professional men, which is gratified by frequent demands for his attention and skill, and the matter of compensation is a secondary consideration.

The means employed by the young doctor "to get business" are as interesting as they are varied. It is not infrequent that we see the medical graduate fresh from college settle down in a country town, and after he has secured a credit with the local sign painter sufficient to enable him to become possessed of a modest placard announcing him as an M. D., inquire of some leading citizen which of the churches is most willing to welcome a pious young man. As most churches lead to the same celestial goal, he need have no conscientious scruples as to which one to join. If he has been raised a Methodist and that church does not seem to offer a good opening, he turns Baptist, but he is never known to join a church to which another doctor belongs, that is, if there are churches enough to go round; and if all the Trinitarian churches happen to be supplied with a surplus of medical talent, perhaps he joins the synagogue, which may be attended by some inconvenience to him at first, but is sure to bring its pecuniary reward. Whatever church he joins, he takes a deep and active interest in its welfare, advocates its doctrines, and pins his faith to it, and he is soon spoken of as a splendid man and a fine physician. If he is endowed with the gift of eloquence, he takes an active part in all the prayer-meetings. The more emotional the form of religion the better for the doctor. He attends all camp-meetings, from a high sense of professional duty, because some of the women may have hysterics. If he has a musical taste and sound, healthy vocal chords, he joins the choir. Music sometimes charms the savage ear of the populace. Orpheus charmed the beasts of the field by it, and I have no doubt that many a young doctor has sung himself into a good practice. It has been wickedly charged against the young physician that most "church calls" will not bear too close investi-

gation. Collusion is suspected when some friend is seen to dash madly up the aisle on a Sabbath morning and whisper in his ear, and the doctor immediately picks up his hat and at once leaves the sanctuary in a hurry. It certainly has a good effect upon the congregation, and the people, taking their minds off the sermon, remark, "What an extensive practice he has! He must be a good doctor." But it is especially suspicious when these Sunday calls are repeated fifty-two times in the year.

I notice too that doctors may nearly always be found at weddings and also at christenings. In the former case, if the bride can be favorably impressed, perhaps the doctor insures a call later on in the domestic experience of the loving couple. And at the christening the people at once recognize the medical man as the kind friend who officiated at "baby's nativity."

Did you ever notice the characteristic absence of the doctor from the funerals of his own patients? I don't blame him for this, because his presence might cause ill-natured remarks by the unthinking. It is not considered in violation of the code of ethics for him to attend the funerals of patients who have died under the care of rival physicians, but he may present a manner indicating that if it had been his case the result would have been different.

It seems to be a good thing for doctors to join fraternal societies, because so many of them do it. But they should not be required to attend the funerals of members. They should keep away from secret society funeral processions. The saddest sight I ever witnessed in all my life was a medical Odd Fellow trudging slowly after a dirge-playing brass band, following to the grave the remains of a dead brother whom he had attended. With this picture still lingering before my mind, my advice to all physicians is to let others bury their patients to slow music.

These graduates will later receive words of advice and wisdom from lips abler than mine, but not from a heart more sincere; and I cannot conclude without addressing a remark or two to those with whom I, in common with others, have labored so long. You go forth to-night fully equipped for the professional battles of life. You are to receive the seal of the approval of this faculty. It will

be intrusted to your keeping with the confidence that it has been well placed. At all times endeavor to elevate the standard of the great profession which you have adopted. Let your lives be marked by an unswerving adherence to a careful course of the strictest morality, integrity, and honor. Keep your consciences clean, and your lives correct.

Your devotion to study must continue to the end. It is chiefly through books that we enjoy intercourse with superior minds, and these means are within the reach of all. Channing says that books "are the voices of the distant and the dead, and make us heirs of the spiritual life of past ages." You must not consider, however, that the study of books is the all-important and only sufficient means for self-improvement. The great sources of wisdom are experience and observation. To open and fix our eyes upon what passes without and within us, is the most fruitful study—books assist us to interpret what we see and experience.

Seek to raise the moral and intellectual nature and put down the animal. Control your appetites. Sensuality is the abyss in which very many souls are plunged and lost. Shun the great evil of intemperance, and do not forget that the most effectual way to avoid temptation is to avoid the tempter.

Be not overzealous to gain riches. Better wear the pure robe of honest poverty than the tainted garb of ill-acquired wealth. Learn to bear prosperity without pride or selfishness. Learn to bear adversity without discouragement or despondency.

Be self-reliant. Remember that the lilies of the field and the millions of wild flowers of the spring each has its individuality, and neither can borrow from, or impart to, another individual of the same class. So with you. You must depend each upon himself, remembering that you shape your own destiny and cannot look to another for professional assistance, support, or redemption.

We extend to you the hand of congratulation, and claiming the right to always follow you with a deep and affectionate interest, we this night tenderly bid you farewell.

OLD TIMES.

BY A. J. HOWE, M. D.

IN the progress of events it is rational and becoming to look backwards occasionally—to be historical and reflective. Since I partook of experiences in the infirmary of Calvin Newton, M. D., forty years ago, many changes have come over the “Reformed Practice.” Prof. C. Newton was progressive and Eclectic, though the latter term did not then occupy a place in the reigning vocabulary. Thomsonians were on the decline and “Botanics” were climbing upwards. Both turned such a cold shoulder to mercury that a dealer in thermometers would not permit a representative of either school to enter his store, for the sensitive metal would instantly retreat to its bulb. All poisons were ignored, though they were occasionally utilized. Minerals were an abomination. A Botanic therapist walked into a drug store one day, and called for a few grains of quinine, remarking that he was obliged to resort to mineral medicines sometimes! Regulars were then styled mineral doctors, and any medicine they used was presumed to be of mineral origin. The Thomsonians berated an education, and pretended to think that inspiration was the more needed accomplishment. At any rate, they depreciated and deprecated what they did not possess. They utterly ignored chemistry, and declared, “Heat is life and cold is death.” Now it is known that the excess of a few degrees of heat is fatal. The physiopath of to-day who represents Thomsonianism pretends that Thomson meant that heat was a phenomenon of life, and cold a sign of death, but history is against him. The Thomsonian looked upon pepper as a promoter of heat in the human body, when in fact it might prove a cooler through the production of perspiration—pepper tea in large quantities would make the imbiber sweat. Thomson builded wiser than he knew. The untutored child of nature admitted that lobelia would produce “alarming symptoms,” but would not concede that the herb was a poison! The average Thomsonian of “ye olden time” was, if not like brown-bread,—half Indian,—inclined to follow the methods of “the medicine man” of savage races;

he was a little off in dress and manners, and despised the ways of educated gentlemen; he wore long hair and a broad-brimmed hat, and commended the ordure of a cow as a poultice; and he plucked certain simples in either the waxing or waning moon. He was nothing if not odd and mysterious. To become the topic of an allopath was his pride—that was proof of his being a somebody!

The Botanic was a higher order of practitioner; he studied botany, and used classical names for medicinal herbs; mullein was *verbascum thapsus*, and golden-seal was *hydrastis canadensis*. With a Botanic it was vulgar to say witch-hazel when *hamamelis Virginica* would be designated. Sometimes the unlettered champion of botanic remedies would get his legs tangled in his togery. I knew one who always called slippery elm, *ulmus vulva-*

Well, in time the followers of Wooster Beach became the users of all kinds of medicines, and called themselves *Eclectics* to indicate a *selective* turn of mind. They used mineral medicines, and discriminated between poisons destructive to life and employed as such, and poisons therapeutically considered. Digitalis might be classed as a poison by the dealer in drugs, but in small doses the physician might find an action which was curative in an eminent degree.

The earlier Eclectics were prone to prescribe large and harsh doses, as if to give a patient his money's worth, and they tended to multiple and complex combinations. Professor Scudder, who now advises single remedies and denounces mixtures, may be quoted as once advocating conglomerations. The index of the American Dispensatory includes "Scudder's Alterative," or compound tincture of corydalis. Turning to the reference, it reads: "Take the roots of turkey-corn, yellow-dock, bark of tag alder, and leaves and roots of figwort, each in fine powder, one troy ounce. Then add alcohol to form tincture; to this add mandrake root, and with water add white sugar to make twenty-four fluidounces. Dose, from a fluidrachm to half a fluidounce, three or four times a day. I am glad to have testimony that my distinguished and consistent associate advises white sugar; generally a very brown kind is employed in the making of alterative syrups. The old prescription for alterative syrup or the compound

syrup of aralia (compound syrup of sarsaparilla), is a complex affair, and has been modified several times. The formula calls for roots of spikenard, yellow-dock, burdock, ground guaiacum-wood, root of sassafras, southern prickly ash, elder flowers, blue-flag, etc.; cover with alcohol and macerate for two days; then add water and refined sugar. This highly delectable and intensely scientific compound once sold to every Eclectic physician in the land, as high as seven thousand gallons being furnished in job lots by one Cincinnati firm during a single year. The medicine was not only an alterative but was given for almost every ill flesh is heir to. The later Eclectics added iodide of potash, thus emphasizing the alterative effects. Now, the iodides are used with water, and the effects are more pronounced, and less disturbing to the stomach. A manufacturing drug concern in our city once lectured me for ridiculing the virtues of his alterative syrup, which was made from the *debris* of a fire which sent a lot of herbs into the cellar, a steaming and smoking mess. The manufacturer said that he never made so effective an alterative in his long career as a wholesale and jobbing pharmacist.

Another favorite mixture was the compound syrup of rhubarb and potassa. This was a famous cure for teething children who had diarrhea, tenesmus, dysentery, *et al.* In its manufacture it called for several essences, spices, refined sugar, and "fourth-proof brandy," if there ever was any such stuff. This made an agreeable "laxative, antacid, and tonic." It was esteemed a specific for cholera morbus, cholera infantum, dysentery, etc. No Eclectic practitioner could get along without a supply of this cure-all for the ailments of childhood. Then there was the compound syrup of partridge-berry. This was a "daisy," and called for *mitchella repens*, helonias, high cranberry, blue cohosh, etc. These roots and herbs were to be covered with fourth-proof brandy and macerated for days; then were to be added water and sugar and essences to impart an agreeable flavor. This combination passed as "Mother's Cordial," and sold immensely. The rural practitioner could not do without it in the management of gynecological cases. A woman in Illinois who had lived in wedlock seven years without pregnancy took a bottle and became

enciente. After a year or so she took two bottles and bore twins. In due time she took three bottles and was delivered of triplets. Her husband then swore he would have no more of the prolific stuff in the house. This is not a story concocted to make the syrup sell; I know the parties and took the history from their own lips. In fact, I have seen the children! Another compound designated "Parturient Balm" was a noted Eclectic pharmaceutical preparation. It called for blue cohosh, spikenard, partridgeberry, queen-of-the-meadow, and alcohol to tincture them; then add sugar and water and brandy; lady's-slipper and comfrey improve the remedial virtues of the parturient. The remedy sustained the woman in labor, prevented hemorrhage, regulated throes, would turn a child, correct any presentation, and bring a boy or girl as desired.

Now, sad to relate, these old-timers are consigned to the tombs of the Capulets; and the unfortunate graduate of to-day has to carry from twenty to fifty medicaments in a pocket-case, putting four or five drops of a tincture in a tumbler of water. Dose, teaspoonful and repeat occasionally. If the medication proves too severe, prescribe blanks or *placebos* till the impression has worn off. By modern methods twenty-nine out of thirty cases get well, hence the modified practice is excellent. Two dollars' worth of drugs will last a year; and the medicines are so agreeable that children cry for them. The doctor never is discharged unless a patient dies, and that is seldom. How could such medication kill? Impossible.

Specifics are the order of the day—pomegranate for tapeworm, etc. Seek a relationship between the effects of a disease and the effects of a remedy upon a healthy body, and the two are affinities, they incline to each other and neutralize one another. But be very discriminating in making the comparison, or a mistake will be made. Do not confound a horse-chestnut with a chestnut horse, nor the bark of a dog with quinine. It requires great acumen to be up in these things. But the practice is elegant when once understood. Blockheads can never see into the scheme; therefore they may as well follow the old plan of compounding and complicating. Some people can never hit anything with a rifle; a shot-gun is needed, firing with the eyes shut.

ABOUT TEMPERAMENTS.

BY G. P. BISSELL, M. D.

I FIND great trouble in diagnosing many diseases very early—as early as a conscientious man practicing medicine would desire to. For instance, the exanthemata before the appearance of the eruption often puzzle me, and sometimes the first stage in pneumonia leaves one in doubt for a few days, or hours, as the case may be; but mostly the incipient stage of phthisis pulmonalis is always obscure, so far as physical signs testify to my senses; and I am bold to say that the same holds with every other physician, notwithstanding all the airs of wisdom which he may put on. But it is this very incipient stage of phthisis which we are most anxious to recognize, and which is of greatest moment to our patient that we should recognize, for his welfare.

But, however much it may expose my ignorance of first principles, I freely confess that I have far less ability to recognize temperaments, and know the indications arising from each, than in the whole range outside that particular phase combined. I can prescribe, for instance, for any of the exanthemata without knowing which it may prove to be just as well as if I did know, for I prescribe for the state that I find the body in, or, differently said, for the amount of febrile action present, and can afford to wait for the special eruption before I pronounce that it is this, that, or the other. So in consumption, anxious as I am to detect the first approach of the disease, I am always suspicious if one is losing weight and strength without manifest reason therefor. Here exclusion suggests the disease. But it is far different with the matter of temperament. To give some instances for illustration. I am a descendant of a light-haired and fair-skinned family mingled with one of pronounced brunette type, and though I took decidedly after the brunette in my complexion, yet I could never decide whether I was of the bilious or sanguine, for my gall did not often overflow, and I seemed to have as much blood as any of the sanguine; while, as for the

nervous, I have seemed to have as much nerve energy to expend as most men. Then again I have a brother who used to be as lean and as dark as myself, but who has grown fat in his old age. But I cry *peccavi*, for perhaps fat is not lymphatic. Anyhow that same brother was always *emphatic*. Probably I am deceived by similarity of sound, for I have a poetic ear.

Again, I have treated many Indians and some negroes. I suppose that the former were bilious, and the latter atrabilious, in temperament. But really, would not a better classification be made by calling the copper-colored aborigine sanguine, the yellow Chinaman bilious, the negro atrabilious, and the Caucasian nervous, especially as the latter has developed more nerve force in shape of thought, and more nerve irritability as a consequence of over civilization, than has any other race of mankind? Will someone versed in the temperaments kindly instruct me which of the several temperaments the negro, the Indian, the Chinaman, and the Mulatto belong to? and does a Caucasian belong to one temperament when he is tanned by wind and sun, and to another when he is bleached by shade? They used to tell me that I was bilious, but now that my hair is gray am I still bilious? Or is this writing an overflowing of gall, and proof of biliousness?

Seriously, brethren, is it not high time that all such remnants of barbaric ignorance were absolutely and definitely dropped out of the vocabulary of medical science, if we desire to be scientific? Surely it would convey as much sense and meaning to my mind concerning one's disease if it were told what religion or denomination of church he might favor, as to describe his temperament. I want something positive and certain, not that which is unproved and doubtful. But probably those who dilate on temperament with so much profundity, do not ask my permission as to just how they shall write, nor do it especially to please me, therefore they will write as they please. I will let them, only I ask that they make the idea penetrate my thick skull just what they mean by temperament, and how it modifies disease, and the action of remedies.

CORRESPONDENCE.

SALT LAKE CITY, Utah; November 23, 1889.

EDITOR CALIFORNIA MEDICAL JOURNAL: I read with pleasure your editorial, "Biography and Eclectic Notables," in which you say: "Evidently we need a biographical library of Eclectic notables. Why does not some ambitious representative of our school undertake the enterprise?"

Dr. G. E. Potter, Jersey City, N. J., in a letter to me dated July 25, 1889, proposed, virtually, that which you have put in print, and as the doctor is a good writer, I would that he give the readers of the JOURNAL his views, or allow me to publish that part of his letter taking up the question.

On page 496 of the JOURNAL, where it reads, "*writing in 1885*," it should be 1858. Please mention this in next JOURNAL, as this will show that the remedy was in use by Eclectics over thirty years before Dr. Shoemaker mentioned it. Hoping that a copy of the JOURNAL will reach the doctor, I remain, respectfully,

R. A. HASBROUCK.

[Dr. Potter is a regular subscriber to the JOURNAL.—ED.]

SELECTIONS.

GLEANINGS FROM OUR EXCHANGES.

BY HANNA SCOTT TURNER, M. D., OAKLAND, CAL.

TRY borate of ammonium in excessive expectoration in phthisical patients; four grains daily.—*Nouveaux Remedy*.

Dr. West advises the use of the fluid extract of motherwort in the suppression of the lochial discharge, given in the form of an infusion, using from a half to a dram in a teacupful of boiling water.

ACID CAMPHORIC, a product of the oxidation of camphor, occurs in colorless crystals, of needle form, and is almost insoluble in water, but soluble in alcohol and ether. It has been recommended as an antiseptic, astringent, and as a disinfectant in typhoid stools. Reichert suggests its superiority, used in one or two per cent solution as a gargle or spray, over chlorate of potash, boracic and salicylic acids, in angina and bronchitis. It has been employed in cases of diphtheria, but with indifferent success. Better results were obtained with three to six per cent solution, used as a spray for laryngeal tuberculosis. Internally it has been administered in doses of one to two grams, three times daily, to prevent the night-sweats in phthisis.—*New Remedies, November*.

A combination of chloral hydrate and potassium bromide in camphor water is an excellent remedy for general insomnia.—*Woodbury*.

A DELICATE TEST FOR BILE IN URINE.—Pour a small quantity of chloroform in a test-tube, then pour down the side of the tube, slowly, the urine. If bile is present the chloroform will become turbid and yellow, darker or lighter according to the quantity of bile present.

DR. EDSON sums up the etiology of typhoid fever thus: First, typhoid fever never infects the atmosphere; second, it never rises *de novo*; third, the causes of the disease, in order of

their frequency, are as follows: First, infected water; second, infected milk; third, infected ice; fourth, digital infection; fifth, infected meat.—*Pharmaceutical Era*.

LIQUEFACTION OF MIXTURES OF CAMPHOR AND OF CHLORAL.—*Camphor liquefies with* chloral, thymol, beta-naphthol, resorcin, pyrogallie acid, monochloracetic acid, trichloracetic acid.

Camphor does not liquefy with oxalic acid, salicylic acid, naphthalin, hydrochinon, acetanilid, betol, salol, cennarin, lead acetate, and iodoform.

Chloral liquefies with camphor, camphor monobromated menthol, turpentine, oleoresin, lead acetate, sodium acetate, sodium phosphate.

Chloral does not liquefy with thymol, beta-naphthol, naphthalin, camphoric acid, succinic acid, paraffin, terpin-hydrate, acetate of zinc, copper, potassium and ammonium, sodium and potassium tartrates, iron lactate, zinc, sulphate, potash alum.—*Pharmaceutical Era*.

THE editor of *Medical Chips* asks: "Do we know the etiology of diphtheria? Has it been established that the disease proceeds from a specific germ traceable to a specific source, and thus continues?" We think not. And as we have witnessed an epidemic of diphtheria originating *de novo*, without being able to designate the cause, I cannot understand why so much stress should be laid upon sewer gas or water pollutions. Epidemics occur on the mountain, in the valley, on the farm, in the village or the city, due, of course, to some cause we know not.

EARACHE.—A liniment composed of five parts of camphorated chloral, thirty parts of glycerine, and ten parts of the oil of sweet almonds, rubbed behind the ear, and saturating a piece of cotton with the liniment and introducing it well into the ear, will relieve the pain as if by magic. If inflammation is present it will quickly subside. A writer in the *Lancet* claims to have relieved cases of obstinate tympanitis instantly by placing the patient in the knee-chest position.

GERMAN MEASLES.—Kraatsch points out a sign of German measles which is almost pathognomonic, according to his experi-

ence, having been present in every case he met with in one epidemic. This is an enlargement of the cervical lymphatic glands, particularly those over the mastoid process. In most cases there is also an enlargement of the glands of the axilla and groin. This glandular enlargement has never been observed by Kraatsch in cases of common measles.

BARTHOLOW gives a small dose of nitric acid, largely diluted, every two hours in failures of the voice from mucous laryngitis or fatigue.—*Medical World*.

INHALATIONS OF MENTHOL IN ASTHMA.—Dr. Jones recommends a twenty per cent solution of menthol in olive oil for inhalation in cases of asthma. In one case in which he tried it, all other medication had failed. Auscultation had revealed hissing sounds everywhere. A few inhalations of the menthol cut short the attacks. The only unpleasant after-effect was a slight heaviness in the head. In numerous other cases the doctor has witnessed the same good effects from the use of the drug.—*Therap. Monatschrift*.

GLYCERINE reduces the causticity of carbolic acid, provided no water is present. In cases of burns by this acid the skin should be washed with alcohol or pure water-free glycerine.—*Times and Register*.

AN ABORTIVE TREATMENT OF CARBUNCLE BY IODOFORM.—First, disinfect the diseased part with carbolic solution one in forty, or sublimate solution one in two thousand. After this, spread upon the surface a layer of powder composed of equal parts of iodoform and oxide of zinc. This dressing should be made with a brush dipped in phenic oil, and repeated twice daily, and continued until the complete drying up of the tumor.—*Times and Register*.

WHEN purpuric spots come and go on the abdomen or lower extremities, without assignable cause, or other symptoms indicative of purpura proper, ascertain if the patient is addicted to the use of chloral.

BITTER substances are most readily tasted at the back part of the tongue; sweet matters are soonest recognized at the tip. The

ninth cranial, or glosso-pharyngeal, nerve supplies the back part of the tongue with taste, through its lingual branches, and also, in some measure, through its branches to the pharynx and tonsils. Its tympanic branch apparently presides over the supply of saliva. The ninth nerve also supplies motor branches to the muscles of the uvula, palate, and pharynx, and general sensation to the surrounding parts. Thus it is an important factor in providing taste, saliva, and means of deglutition. The forepart of the tongue receives its faculty of taste from the chorda-tympani nerve, a branch of the seventh, and the mouth receives general sensation from the different branches of the fifth.—*Medical World*.

THE PREVENTION OF MAMMARY ABSCESS.—Miall says that when mammary abscess is on the point of forming, he has frequently seen all symptoms disappear in a few hours under the influence of fomentations with hot water and carbonate of ammonia. He uses one ounce of the carbonate to a pint of water, and, when solution is accomplished, the temperature of the fluid will be hardly too high for fomentation to be commenced with cloths dipped in the liquid. He applied them from half an hour to two hours, at the same time protecting the nipples. He has often had immediate relief, and seldom requires more than three applications.—*Medical News*.

THIOL.—Dr. L. G. Doane, New York City, says: Thiol can be used with gratifying results in acne, eczema, erysipelas, leprosy, burns, scalds, and frost-bites, and urges physicians to give it a trial in these diseases, using—

Rx Thiol, gr. ii.
 Pulv. Glycyrrhiza, gr. ii.
 Glycerine, q. s.
 M. ft. pil., viii.

Sig. one three times a day.

Rx Thiol, ʒi.
 Zinci oxide, ʒii.
 Amylum, ʒi.
 Talc, ʒii.

M. Sig.—Dust on parts at night.

TUBERCULOSIS FROM CIGARS.—A German physician of an investigating turn of mind has discovered another danger. It is in the cigar. It appears that cigar makers having scrofula and phthisis are in the habit of moistening the tips of the cigars with saliva. He has made microscopical examinations of a number of these tips, and asserts that tubercular bacilli have been found in them.—*Medical Brief*.

A PRECAUTION TO BE TAKEN AFTER GIVING AN INJECTION OF MORPHINE.—M. Huchard, in his fortnightly notes on therapeutics, points out how necessary it is, after giving a hypodermic injection of morphine, to maintain perfect silence in the room where the patient is lying. Morphine, far from suppressing sensitiveness, like chloroform, rather tends to exalt the excitability, and particularly the liability to disturbance from slight noises. This peculiar exaltation of excitability is most marked in the frog, but may also be noted in other animals and in man, though the fact does not appear to have received proper attention hitherto. The failure of morphine injections to procure sleep is, in the majority of instances, due to neglect of this simple precaution.—*London Medical Record and Therapeutic Gazette*.

BET ROOT IN HABITUAL CONSTIPATION AND HEMORRHOIDS.—In the St. Petersburg new periodical (*Meditzina*, Nov. 6, '89) Dr. S. K. Kazatchkoff draws attention to the fact that a strong infusion, or decoction, of the common beet-root (*beta vulgaris*) represents an excellent mild aperient, very much in favor with the South Russian peasantry, who resort to it especially in cases of atonic habitual constipation and hemorrhoids. It is taken in doses of from one-half to one tumblerful at bed-time, or early in the morning, about an hour before breakfast. The remedy does not cause any abdominal pain, griping, or rumbling, nor does it create any tendency to consecutative constipation. On the contrary, any disposition in that direction is decidedly removed by a daily use of the decoction for a certain period. It is stated, however, that the patient's bowels get habituated to the beet-root in a week, so that by the end of that time the dose of the decoction should be increased, or a couple of apples a day be added.

According to the author's experience, many constipated patients prefer the beet-root "juice" to castor oil, rhubarb, podophyllin, magnesia, milk-sugar, milk, mineral water, and similar ordinary means used by them previously to their making acquaintance with the simple remedy under consideration.—*London Medical Record and Therapeutic Gazette*.

ANEURISM IN THE RIGHT ORBIT CURED BY DIGITAL COMPRESSION.—At the meeting of the British Medical Association in the Section of Ophthalmology, Mr. A. H. Benson, of Dublin, related the case of a man, aged thirty-eight, who, nine months previously, while fencing with single sticks, received a severe blow with the point of the stick on the outer side of the orbit. The skin of the external cathus and outer portion of the upper lid was cut and bruised. Two months later the right eye was noticed to be more prominent than the left. The conjunctiva was also congested and chemosed. His vision at that time was, right six-eighteenths, left six thirty-sixths. When first seen by Mr. Benson five months later, the sight of the eye remained unchanged; there was no pain, but a throbbing noise in the right temple and eye. The eye was protruded directly forward, its motion being restricted in every direction. The lids were thick, the whole ocular conjunctiva chemotic, with large, tortuous veins, most marked at the outer side. On everting the upper lid, the external portion of the superior *cul-de-sac* was found filled with dark, tortuous veins, looking like a mass of worms. The ophthalmoscope showed slight myopic astigmatism, worse in the left eye. The transparent media were normal, but the veins of the right retina were fuller and darker than those in the other eye. With the stethoscope applied over the globe, a loud pulsating bruit, synchronous with the pulse, could be heard. No visible pulsation of the globe was observable, nor could thrill be felt with the hand. Vision was normal in both eyes. Compression of the right common carotids completely stopped the bruit, which at once returned on removing the pressure. A diagnosis of aneurism in connection with some of the orbital arteries far back was made, and digital pressure determined on. A cast of the face was taken before commencing treatment. On March 18,

six months after accident, digital pressure of the right common carotid against the vertebræ was applied for five minutes, then, on successive days, for nine, eleven, thirteen, and fourteen minutes respectively. Digital pressure, varying in duration from ten to fifteen minutes, was kept up night and morning till April 20. On some days the bruit could hardly be heard, on others it was louder than ever. The appearance of the eye was unchanged. It was, therefore, determined to try continuous pressure; with the aid of relays of assistants, complete occlusion of the common carotid was kept up for two hours and a half. Next day the appearance of the eye was wholly changed. The conjunctiva looked almost normal, the œdema gone, the veins much smaller, those in the superior external *cul-de-sac* having altogether disappeared. The patient stated that he no longer heard the puffing sound. For the next two days compression was kept up. No vascular bruit could then be heard with the stethoscope, and the appearance of the eye was normal. No further pressure was applied, but the man was kept quiet till May 13, when he was discharged perfectly cured. At present (August) some proptosis was still present, but the dilatation of the pupil was wholly gone, and, according to the patient's statement, the eye felt just the same as before the accident. (Four casts, showing the changes which took place during the treatment, were exhibited.) The result in this case seemed to be almost unique.—*Therapeutic Gazette*.

DIET IN THE TREATMENT OF DISEASES OF THE SKIN.

FROM a certain point of view the integument may be compared to a semi-translucent veil, which, although it covers and protects the soft parts beneath, yet reveals in its own condition many important facts concerning various organs and tissues, especially concerning the circulating nutrient fluid. If blood has been lost by a profuse hemorrhage, or profoundly altered by severe illness, the pallor of the skin tells us of the waste of red corpuscles. A

fluid rich in red globules and an active circulation manifests itself in a ruddy countenance. A peculiar state of the blood found in adolescent girls communicates to the skin a greenish-yellow hue, which furnishes us the name of the condition, chlorosis. In the same way mere inspection of the cutaneous envelope enables us to assert or suspect the presence of a number of disease processes. Amyloid degeneration, chronic malaria, leukæmia, jaundice, Addison's disease, purpura, scurvy, erysipelas, cancer, and pyemia declare themselves in the appearance of the skin. There are other general diseases, again, which may or may not be marked in their course by cutaneous lesions; such are scrofula and diabetes mellitus. Some general diseases lead to affections of the skin so definite and distinctive that we are referred at once, as by a finger-board, to the underlying cause. To this class belongs syphilis and, especially, the exanthemata, in which we mainly depend for our diagnosis upon the nature of the eruption.

An enumeration of general disorders attended by notable alterations in the appearance and nutrition of the skin is sufficient to show how intimately dermatology is related to general medicine, how questions suggested by apparently trifling diseases of the skin may involve an examination of every important organ and function of the body. As the state of the skin's nutrition is an index to that of the organism generally, we are led to perceive clearly that whatever promotes the general nutrition promotes at the same time that of the skin. As in disease so in health will the integument be a reflex of the condition of the organs which it covers.

The health of all tissues depends upon an appropriate and sufficient supply of pabulum, and the skin can be no exception. Therefore the attention of the physician who is specially concerned with diseases of the skin is drawn to the subject of diet as strongly as is that of the general practitioner, the gynecologist, the neurologist, or any other specialist. One needs to study the functions of the alimentary canal with as much care in the treatment of a case of eczema, urticaria, acne, or pemphigus, as in that of the many forms which indigestion may assume. The re-

lation, indeed, is more than a mere general one, for we constantly find that derangement of the digestive organs is productive of disease of the skin. Manifestly, then, to considerations of physiology and etiology we must add those of therapy. If digestive troubles be the source of certain skin eruptions, we can scarcely hope to cure the effect without striking at the cause. The subject of diet, therefore, should assume larger proportions in our writings upon dermatology. Many eminent authorities appear to undervalue the importance of constitutional treatment in dealing with diseases of the skin. But I believe that in many instances it is of more value than purely local treatment. And among modes of constitutional treatment none is more important than alimentation.

Disorders of digestion depend upon varied causes, such as the state of the nervous system in general, and of the mind in particular, functional or organic disease of the stomach, liver, pancreas, intestinal mucous membrane, paresis of the muscular coat of the stomach or bowels, interference with eliminative processes, differing conditions of the circulation, etc. There appears to be no direct relation between particular affections of the alimentary canal and disease of the skin. Catarrh of the stomach, for instance, is not necessarily represented upon the skin by eczema. It would rather seem that when digestion is imperfectly performed, products of retrograde metamorphosis enter the circulation and act as toxic agents upon various tissues, the skin included. If uric acid, comparatively insoluble and difficult of elimination, result from the incomplete elaboration of nutritive material, a train of evil ensues, among which we meet with certain lesions of the skin. The same is true of imperfect digestion of starchy and fatty substances, and even of the mineral constituents of food. If the food itself be wholesome and digestible, bad dietetic habits may nevertheless lead to indigestion and faulty nutrition. Eating in haste or when the mind is upon a strain of anxiety, insufficient mastication, irregularity in the hours of meals, are potent factors in the production of dyspepsia. Irritation of the nervous filaments terminating in the gastric and intestinal mucous membrane, also doubtless plays a part in

the production of many pathological conditions of the skin. Many suffer from urticaria after partaking of articles which are harmless to most people, such as shell-fish, salt pork, cucumbers, strawberries, honey, eggs, coffee, and numerous others which might be mentioned. Even those diseases produced by vegetable parasites find a more favorable nidus upon the integument of those whose nutrition is impaired.

In the treatment of those general disorders to which allusion has been made, every practical physician is in the habit of laying great stress upon an appropriate diet. In anemia he seeks to replace the loss of hemoglobin by digestible food supplemented by such drugs as supply directly those elements of which the blood stands in need. Chlorosis, too, demands a judicious promotion of the digestive functions. Plethora, on the contrary, suggests the employment of a spare diet. In Bright's disease a milk diet is justly esteemed. In diabetes mellitus we seek to eliminate sugar-forming substances and restrict the patient to animal food, fats, cream, milk and buttermilk. Scrofula requires a liberal supply of nutritious food containing an abundance of fat. Scurvy indicates vegetables and fruit. In lithiasis it is advisable to withhold meat and to substitute vegetables and fruits.

The importance of suitable food in important diseases affecting nutrition is unquestioned. In disorders of the skin, the origin of which often appears obscure, the effect of diet is not always so justly appreciated. Unless the general health is obviously impaired, close inquiry concerning the state of the nutritive functions is often neglected. Some diseases of the skin, indeed, are intimately related to indigestion. In urticaria, eczema, and erythema simplex, we may frequently trace the connection between a derangement of digestion and the cutaneous malady. Allusion has already been made to certain articles which are especially apt to produce attacks of nettlerash. But an embarrassed stomach will often, in itself, provoke the cutaneous outbreak, irrespective of the nature of the food. The loaded tongue and other symptoms of acute dyspepsia point unmistakably to the cause of the disorder. The paroxysm, however distressing,

is of brief duration, and an emetic or purgative, or both combined, will bring speedy relief. Nevertheless, the attack is apt to recur by the operation of the same principles which incited it in the first place. In case the disease assumes a chronic form a well-regulated diet is of the first moment.

It goes without saying that substances notoriously difficult of digestion should be sedulously avoided, and this remark particularly applies to those which are frequently followed by eruptions of urticaria. Great care should be taken in the use of articles which, like animal food, may embarrass the liver, or those which, like fatty, amylaceous, or saccharine materials, readily undergo fermentative changes in the alimentary canal, the deleterious products of which are received into the circulation. Alcoholic liquors, as a rule, should be forbidden. In the lithic acid diathesis a highly nitrogenized diet is unadvisable.

Gastro-intestinal derangement is a frequent cause of eczema. The absorption of waste products, associated as it often is with defective excretion, may determine an outbreak of this disorder. The nervous perturbations which excite, or are excited by, indigestion are likely to contribute secondarily to the result. The occurrence of eczema during diabetes mellitus has been already mentioned. It is common also in scrofulous children. In the acute form, especially when a large extent of surface is involved, and in young subjects, the condition may approach, in severity and constitutional reaction, that of a symptomatic fever. In this case a bland, unirritating, and easily digestible diet is indicated, such as milk, milk toast, boiled rice or rice pudding, tapioca, arrow-root, etc. When eczema occurs in a gouty subject meats should be sparingly partaken of, and alcoholic fluids not at all. The diet should be composed chiefly of vegetables and fruit, with bread and butter. If the rheumatic diathesis be productive of eczema, articles which readily undergo fermentation should be eliminated as far as possible from the food. A scrofulous patient requires liberal sustenance. Fat in some form or other should be as freely supplied as the state of the digestive organs will permit. Meat, except the more indigestible kinds, as lamb, veal, or pork, soups or broths, eggs, custards, milk, and vegeta-

bles, should supply the staple. I regard the cod-liver oil, so universally given in any scrofulous manifestation, as a true food. Starchy substances should be given rather sparingly. Milk is, doubtless, the most general pabulum in all the protean varieties of this disorder. Unfortunately, however, patients will often tire of a rigidly monotonous milk diet. In this case, unflinching persistence may defeat its own object. We may often, however, vary the regimen by the use of puddings prepared with milk, as bread, rice, or tapioca pudding, custard, or by ice-cream. When eczema is produced by diabetes it is evident that its relief must depend upon the success of our treatment, chiefly dietetic, of the general condition.

Erythema simplex often results from digestive disturbances, and a suitable regulation of the diet is an important measure in preventing its recurrence.

Affections of the cutaneous glandular apparatus generally bespeak lowered nutrition, and require food of a supporting character as an important adjunct in their treatment. Their internal medication often resolves itself into the effort to benefit digestion and assimilation. Seborrhea is engendered by a variety of causes, which agree in so modifying the function of the sebaceous glands that an increased quantity of vitiated secretion is furnished. These influences may be either internal and general or external and local. Accordingly, both constitutional and local treatment is required. We must invoke the assistance of all the laws of hygiene. The food must be sufficient in quantity, nutritious in quality, and of a digestible nature. Weak digestive powers must be strengthened by the appropriate remedies. Beef, mutton, eggs, poultry, rabbit, soups, pigeon, sweet-bread venison, oysters, fresh fish, and the more digestible vegetables, are especially valuable.

Acne is peculiarly liable to appear at the age of puberty. The physiological activity which, at that period, marks the sebaceous glands and hair follicles, may readily pass the border line and become pathological under the influence of any exciting cause. Such an excitant is disorder of the alimentary canal. Moreover, the subjects of acne generally present evidences of impaired

nutrition in the form of anemia, chlorosis, general debility induced by genital defects, or suffer from some constitutional taint, notably scrofula. All these elements invite the administration of nutritious food, and the dietary should be constructed upon the same plan as that already outlined for seborrhea. Hyperidrosis and anidrosis are usually found in debilitated subjects, whose diet, therefore, should be of a supporting character. Rosacea is generally developed in consequence of long-continued irritation of the walls of minute blood-vessels, the *materies morbi* being waste products, the result of incomplete digestion or the presence of alcohol in the blood. These two causes, indeed, are generally combined. From this statement the inference is plain. The food should be simple and substantial, and alcoholic beverages should, in most cases, be interdicted.

Purpura is the expression of diverse morbid states of the blood, the walls of blood-vessels, or of the nervous system. It is preceded or accompanied by considerable, or even grave, prostration. The treatment, consequently, needs to be of a stimulating character, and among the means contributing to this effect should be placed an abundant supply of nutrient material,—milk, soups, broths, or oysters.

Lichen planus is often traceable to impairment of the digestive functions, and recovery is accelerated by a systematized, liberal diet, consisting of animal food, eggs, milk, poultry, fruit, and vegetables. Agents which promote digestion may be, at the same time, employed. Lichen ruber, a distinct and more severe malady, rare in this country, will be benefited by a similar regimen.

Herpes zoster is due to an affection of sensory nerves and ganglia. It is accompanied by severe pain of a neuralgic type, and calls for an abundant supply of fatty articles of food, as milk, cream, butter, eggs, animal fats, vegetable oils, cocoa, etc., not forgetting cod-liver oil.

Pemphigus, although of obscure origin, is marked by evidences of depression which may be profound or even fatal. It may attack the mucous membrane as well as the skin. The indications for supporting treatment, consequently, are clear. Soups,

poultry, the more digestible meats and vegetables, eggs and milk, should make up the bill of fare. The same remarks concerning food apply to hydroa.

Sycosis is often dependent upon a debilitated state of the system. It is observed among those who are mentally or physically overworked. It follows the use of unwholesome and unsuitable food. Nutritious food, therefore, should be an essential part of any plan of treatment adopted for its relief.

The pustular diseases of the skin, impetigo, impetigo contagiosa, and ecthyma, are, as might be anticipated, attended with derangement of the alimentary canal and marked general depression. The dietary should be constructed upon the same plan as that outlined when speaking of pemphigus.

The wide extent of surface involved in pityriasis rubra, the frequent recurrence of attacks, the constitutional reaction, demand vigorous alimentation. The digestible meats, the fat as well as the lean, strong soups, milk, cream, eggs, vegetables, should be supplied as liberally as the digestive powers of the patient will admit. When we remember the serious constitutional disturbances by which furuncles are often produced, we perceive the importance of an appropriate diet. If they occur in the course of diabetes mellitus, the regimen suitable to that disease is demanded; if in a rheumatic, gouty, scrofulous, or tuberculous condition of the system, the diet should be arranged in reference to the underlying diathesis. But, without the presence of any actual general disorder, boils may be the expression of malnutrition arising from dyspepsia, in which case a selection of foods should be made in accordance with the form which the indigestion assumes. The necessity of supporting diet is even more urgent in carbuncle. Its frequent dependence upon systematic disease, and its tendency to attack those of advanced age, the exhaustion which it occasions, call imperatively for animal broths and milk, with the addition, as a rule, of alcoholic stimulation.

The hypertrophic skin diseases betoken profound modification in the nutritive processes, and therefore alimentary principles are demanded in their management. They are generally of an

inveterate nature, and require the utmost patience on the part both of physician and patient. Even if the results of perverted cell activity cannot be removed, alimentation is an important element in preventing recurrence or extension of the morbid process. In psoriasis a great deal depends upon attention to the gastro-intestinal tract, and the effect of any medicinal measures is greatly enhanced when digestive failures are first corrected. In recent cases I think it wise to limit the amount of nitrogenous substances consumed, depending for support rather upon the carbo-hydrates, supplemented by bread and butter, fruits and vegetables. Ichthyosis is essentially incurable, but in addition to local treatment, which is our main dependence, it seems advisable that the diet should be rich in fats, in the hope of aiding the nutritive effect of the unguents applied externally. Scleroderma may also be favorably modified by the use of fatty articles of food.

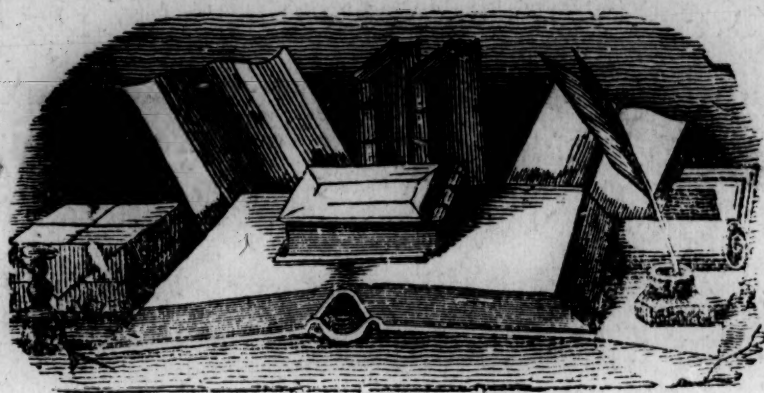
Alopecia is doubtless remotely connected with defective general nutrition. A poor and innutritious diet in childhood and youth, or a rigid reliance upon a few articles of food, are among the causes which lead to baldness. If this be so, it points our attention to the correction of these unphysiological habits, or their effects. Regulation of diet should enter into our treatment of this affection. Especially is this true of alopecia circumscripta.

Scrofula is a frequent predisposing cause of skin diseases. The lesions, however, which occur in scrofulous patients are by no means always distinctive. Eczema in a scrofulous person, for instance, presents precisely the same appearance as in one free from this taint. The only cutaneous lesion specifically diagnostic of scrofula is ulceration secondary to prior affection of a subjacent lymphatic gland. In this, as in all the manifestations of struma, valuable aid is to be derived from a generous diet. Fatty substances are to be particularly commended. Lupus erythematosus is benefited by the same regimen. Even in such fatal diseases as lepra, epithelioma, and sarcoma, the use of suitable food is not entirely without advantage. In lepra the diet should be bland and nutritious, in epithelioma and in sarcoma, bread, milk, eggs, vegetables, and fruits may be allowed; it is advisable to limit the consumption of animal food.

The eruptive fevers claim the attention of the dermatologist, since the pathognomonic signs manifested upon the skin. In the more severe forms of the exanthemata, so great is the febrile reaction that gastric intolerance is a prominent symptom. Milk, or milk and lime-water, is often all that will be borne. Fortunately, in scarlatina the fever is of brief duration, and in view of the frequent occurrence of nephritis as a sequela, no article is better adapted to the case than milk. After the subsidence of the febrile paroxysm, however, beef soup, beef juice, mutton broth, or milk toast may be added. Rubeola and r6theln, as a rule, demand less scrupulous attention, although in black measles the same sustaining diet is necessary as in any other virulent specific fever. Confluent and malignant small-pox require systematic nourishment from the beginning of the attack. Every fourth hour the patient should be given milk, beef tea, oysters, milk toast, or eggs. Erysipelas is another infectious disease characterized by marked depression. Vitality must be supported by vigorous alimentation of the same nutritious and assimilable nature demanded in variola, typhoid and typhus fevers, and diphtheria. Food should be administered at regular intervals, and in quantities as large as can be tolerated.

The skin is liable to certain neuroses, in which its sensibility is heightened, lowered, or variously altered. These modifications are for the most part dependent upon organic or functional disease of the nervous system. The functional disturbance is not infrequently due to chronic indigestion. Whatever may be the cause, it is nearly always of such a nature as to indicate a generous diet, rich in fatty foods, the same, in fact, as would be appropriate in cases of herpes zoster or neuralgia.

Experience has convinced me that all the serious diseases to which the skin is liable are more successfully treated and more rapidly relieved when the digestion and the food are regulated. Their treatment should involve much more than a choice of dusting-powders, lotions, and ointments, or a blind reliance upon arsenic. Alimentation, indeed, is but another mode of medication. The mineral substances contained in foods are identical with those demanded for the composition of the blood and tissues. As far as these are absorbed from the food, to that extent are drugs to be looked upon as merely supplementary.—*John V. Shoemaker, A. M., M. D., in Dietetic Gazette.*



EDITORIAL.

Eclectic Biography Again.—Dr. Hasbrouck's brief communication on the above subject in this number prompts a few more suggestions. Probably numerous of our readers thought the subject over before it was mentioned in the November issue, but we are glad to know that at least one can afford a hearty response.

Such an enterprise should be made an inviting one both for those who are to furnish the material and for the compiler as well. In order that this may be so, certain inducements should be offered from both sides. First, the publisher should have plates furnished him free of charge of the portraits of those who are to be included in the work, so far as consistent. That is, each one living should respond when invited, by forwarding a plate at his own expense, say eight or ten dollars, from which the impressions may be taken. Deceased parties cannot be expected to do this, and the expense must fall on the publisher, who, however, ought to be well paid in the end from sales of the work.

In return each living subject should be permitted to furnish the copy for his own biography, that there may be no reason for complaint as to want of justice in presenting fairly his claims to eminence, and should be entitled to a copy of the work without further charge, in best binding, post-paid.

Then there will arise the question, Who are the worthy ones? Possibly by good rights our authors should come first, for they are the ones to whom we owe, largely, our success. But as the pioneers are entitled to a prominent place, and they came first, it might be better taste to give them recognition in the opening pages.

Some of these have been authors as well, namely, Beach, Morrow, the Joneses, and others in the East; in California, Snyder, Warren, and possibly one or two others ought to come in for a share of notice; for while they may not have possessed great ability as authors or practitioners, they undoubtedly manifested a strong individuality in facing odds and standing by their principles in then almost alien lands. Possibly the pioneers in each State ought to be named.

After this class should follow the authors of our school. Everyone who has published a text-book upon Eclectic medicine should have a place here, and to provide that no jealousies arise, alphabetical order should be observed in arranging them, even though some of the most deserving came last, and those of little note first in the list.

After the authors, perhaps the president and ex-presidents of the National should be noticed, not that all of them deserve a great amount of laudation, for often successful presidential candidates are more lucky than gifted, but as this institution is supposed to carry our banner, its presiding officers should be worthy of recognition. And also its much-worked, but poorly-requited, secretary and treasurer.

Then there is an humble and unassuming class of whom future generations should know—men who have added substantial gifts to our materia medica, as Bundy, Kunze, McClanahan, Pruitt, and others, mention being made in the text of the particular services they have rendered. Quite a list of deserving ones of this character might be compiled by an enterprising man.

Then there is another class—humble toilers, but possibly the most useful ones of all, those who have kept the lamp burning by contributing regularly to our literature. Let a given standard be set up, say let anyone who has contributed ten readable articles to our literature in his life-time, be mentioned honorably.

After this comes a list of still more modest men who have been the guardians of our fold—men who have kept in mind the matter of medical legislation and other essential points vital to our existence, at sacrifice of time, comfort, and money. There are many who have never been heard of in our literature who

have been largely instrumental in our success. On the Pacific Coast may be noticed Prof. D. Maclean, to whose indefatigable industry we largely owe our new college. Drs. Webb and MacRae also deserve credit for earlier services. Let history thus requite them.

And last, and possibly least, let the college professors have a chance—poor creatures of fickle fortune. Let the professors of every college that has been faithful to its requirements, have places here to show their handsome or homely, grave or gay, round or angular, wise or otherwise, faces.

And about medical editors. Should they be mentioned?—Well, we would rather say not. If anyone has an opportunity to press his own claims for recognition, it is an editor; and if there be one so dead that oblivion claims him as its own, let him go.

About Eclectic Reprints, etc.—K.'s article in last month's issue has prompted a few thoughts upon this subject, which we will improve the opportunity to note. Let us look the article over again to see if some useful lessons may not be drawn from it, and also some justification for those who come under its strictures; for, though evidently not intended as a rebuke, the paper must cause some twinges of conscience in certain quarters.

As to the selection of articles from old-school and homeopathic sources to fill the space not occupied by original material in the JOURNAL, it must be remembered that the rank and file of the Eclectic profession are readers who are not content with one or even two Eclectic journals, but many of them subscribe for three or more of these; for this reason we prefer to make such selections as shall not have already become stale to our subscribers. The *Eclectic Medical Journal* is good reading to have in the office, and so a number of others we might name of the same ilk, but reprints from them are very likely to have become old before they reach our physicians second-hand.

We therefore prefer to select such articles as shall not be likely to come before our readers in any other way, that they may get all that our journal contains completely new to them

at least. It is true that many Eclectics subscribe for old-school and homeopathic journals, and this is right; we desire to see them all wide-awake and investigating in every field. But they are not universally omnivorous medical readers, and outside the beaten track is the place to go for novelties, though we have made it a practice to select occasionally from an Eclectic exchange when anything exceptionally good or practical reaches us.

But we must protest against the proposition that our literature is so much behind that of the other schools. Not long ago an old-school writer indulged in the statement that irregular journals, Eclectic and Homeopathic, were more ably edited than those of the regular school. There is no reason why this should not be so, and while it must be admitted that our practitioners are somewhat slack about contributing their experiences, both old-school and Homeopathic periodicals contain a large amount of material which must be read, if read at all, at the expense of time and labor lost. As Professor Howe once expressed it, many of the articles are characterized "by a diarrhea of words and a constipation of ideas." Only Eclecticism in fact and deed can constitute valuable journalism, though we admit that we find this in numerous exchanges outside those of our own school. It would indeed be prosy reading to follow in the footsteps of the masters of medicine; then a few yellowed tomes as old as the moral law and as musty as the catacombs would suffice for a physician's mental pabulum. And such it was before the days of Eclecticism.

As to enthusiasm in school it is as difficult to be Eclectic and be always constant to one's own school as it is to be liberal and religious, as the world goes, at the same time. Even Eclectic medicine is open to criticism, and the true Eclectic will criticise constantly, for by such watch-word he conquers. Eclectics are proverbial dissenters. All our leading lights have been so disposed, and we are therefore placed in an awkward position for fealty to school.

But it is true there might be more enthusiasm in our branch of the profession if so many were not ashamed of their colors.

It requires considerable strength of character for an isolated practitioner, even though he graduated with enthusiasm, to stand by his principles and advocate them when surrounded by those who seek in every way to throw discredit upon him for reason of the faith that is in him. There are even some in densely populated parts, surrounded and encouraged by their own colleagues, who only whisper the fact that they are Eclectics, and are never so happy as when rubbing noses with some crafty Allopath who is appropriating the chestnuts as they pull them from the fire. The writer has been offered lucrative positions more than once if he would forswear the doctrines of his early medical education, and though not among those who pray on the street corners on account of righteousness, he has felt that nothing could repay the loss of self-respect that such a course must involve. It required several years to break over a printers' office rule of expunging capitals and get the word "Eclectic" capitalized, but we now print it, as we have always written it, with a capital "E."

Another drawback to complete success in Eclectic journalism is modesty among some of our leading lights. No school on the Pacific Coast can boast of a better surgeon than we possess, no man is living in whose hands the writer would sooner trust his life if skill and conscience were to be put to the test, and yet the fact is not known so far as it might be. This is unfortunate, for numerous reasons.

To illustrate: Not many years ago a so-called Eclectic, at least formerly a member of our State society and a licentiate of our board, came from the interior to San Francisco and submitted to a surgical operation by the hands of a well-known old-school surgeon. After recovery he visited a veteran Eclectic of Oakland to revive old acquaintance, and after detailing the particulars of his case, he remarked that there were "no Eclectic surgeons on this coast."

It will be remembered by some of our readers that the writer not many years ago moved the expulsion of a member of the State society for boldly flaunting on the street the fact that he called the assistance of Allopathic surgeons when he required

surgical aid, as there were "no Eclectic surgeons in San Francisco."

And why this state of affairs? Let the following statement answer: Several laparotomies and other important operations have been performed in San Francisco by Eclectic surgeons within the past year, and yet not a word of this has ever reached the JOURNAL. The veriest tyro in surgery who publishes his operations can easily outshine the most talented operator who chooses to remain in obscurity.

Such omission cannot be the result of indifference, for certainly every successful surgeon cherishes a laudable ambition, and pride in his own success. It cannot be from want of ability to make a successful report. It cannot be from laziness. It can be the result of but one fault or virtue(?)—innate modesty.

Come, gentlemen, let us have a little revival; let us see if we cannot have more warmth, more enthusiasm, more indigenous medical literature.

The State Society.—The State society passed off fairly well. The weather was unfortunately very unpropitious for a large turn-out from a distance, and the surprising feature of the affair was that so many as did, came through the rain, for there had been a ten days' down-pour, which came to a straggling end late in the second day.

Prof. Edwin Freeman, formerly of Cincinnati, now of Fresno, was present, accompanied by his pleasant wife, and made a few remarks. Professor Freeman, while teacher of anatomy in the Eclectic Medical Institute, endeared himself to a large number of students, several of whom were present to shake him by the hand. We are sorry that a better reception was not tendered him; this is a forethought that came afterward.

Among the constant country members was Dr. G. W. Stout, of Ukiah, who never fails to be on hand, a valuable fact to be remembered in the choosing of executive officers in the future. Then there was Dr. Hervey, of San Jose, a new recruit, and one whom we shall later hear from, doubtless. Dr. Osborn, of San Jose, was there to represent the lady physicians, with Drs. Farmer,

Turner, and Sage. We make special mention of what ladies we know who attended the first day, for those who come through the rain are leading spirits always.

The president, Dr. Bixby, was on hand, and proved an efficient officer as well as an interested listener.

The weather, and possibly other circumstances, conspired to render the sessions rather slim in attendance, though if all who came had attended at once, a much better showing in numbers could have been had.

The subject of medical advertising engrossed so much attention that much less than the usual amount of time was devoted to ordinary society work. A few essays were read, and interesting deductions drawn, both in the subject matter and in the discussions which followed.

Dr. Gere reported an intractable case of dysmenorrhea, which was discussed.

The evening session of the first day and considerable of the second day were devoted to the disposal of the cases of members of whom complaint as to unprofessional advertising had been entered. The closing session was largely devoted to election of officers and discussion of papers by Professors Gere and Cornwall. The officers elected to serve the ensuing year are: President, H. T. Webster; First Vice-President, H. S. Turner; Second Vice-President, G. W. Stout; Recording Secretary, W. A. Harvey; Corresponding Secretary, M. H. Logan; Treasurer, John Fearn; Board of Censors, C. S. Clark, C. H. Hervey, and J. P. Wilks; Board of Examiners, F. Cornwall, G. G. Gere, J. W. Hamilton, M. H. Logan, D. Maclean, J. P. Schmidt, A. E. Scott; alternates, W. A. Harvey, J. C. Farmer, and J. C. Schlarbaum.

Cactus Grandiflorus in Pulmonary Hemorrhage.—One swallow does not make a summer, but the remedy which helps one out of even a single predicament is not likely to be soon forgotten or neglected.

Within the past two months the writer has had some severe experience with a case of pulmonary hemorrhage which well-nigh

proved intractable. It was in a case of interstitial pneumonia occurring in a female patient past sixty, and which finally terminated fatally, but the writer enjoyed the satisfaction at least of controlling alarming outbreaks of hemorrhage which were present when he assumed the case, for three weeks before death, though at one time it seemed as though the persistent loss of blood must prove speedily fatal.

For more than a week tannic and gallic acids, erigeron, lycopus Virginicus, ergot, geranium maculatum, magnifera Indica, ipecac, hamamelis, and other remedies were tried with but partial success—constant streaked expectoration and occasional outbursts of hemorrhage amounting to a stream, were the cause of continual foreboding. At length it occurred to the writer that someone had recommended cactus in just such cases, and the following prescription was ordered:—

R S. m. cactus grandiflorus, ʒi.
 Glycerinum, ʒi.
 Aqua, ad. q. s., ʒiv.

Sig.—Take a teaspoonful every two hours.

From this time there were no more active hemorrhages and the streaks of blood soon disappeared from the sputa, though the cough was severe and racking for three weeks afterward.

We claim no originality in this, only the enterprise of trying the remedy and reporting results.

The Committee on the Popularizing of Eclectic Methods.—In 1888 a committee of three was appointed at the State society to devise ways and means to bring our claims as a class of physicians more prominently before the public on the Pacific Coast, but it failed to materialize, and with a good-natured reprimand from the president, was re-appointed with a little change at the last meeting to serve during the ensuing year.

The committee as now standing consists of H. T. Webster, chairman, F. Cornwall and J. Fearn. This committee has determined to do some work, and by mutual agreement each member will prepare an article for publication. The three, with a preface

explaining the objects of the essays, will be printed in pamphlet form for distribution to the members for missionary work. It will be ready before March first, probably.

Dr. Cornwall will write under the title, "Why Am I an Eclectic;" Dr. Webster, "What Is Eclectic Medicine," and Dr. Fearn, "What Does the Eclectic Practice Propose to Do for the Sick Man."

It is to be hoped that the profession will use this material judiciously, handing it out to, or leaving it on the office table only for those who will be liable to give it the attention of a careful reading. There are many who never care to give any such affair notice, and material handed to them would be wasted. What we propose to do is to educate inquiring minds, and this pamphlet will be as good ten years from now as at present.

The essays will be published probably in the JOURNAL before they are distributed, and a little time allowed for hints from those of the society who may see fit to suggest changes or additions. They will probably appear in the February number. Let all be heard from then or forever after hold their peace.

The pamphlet will be apportioned to members of the society in good standing without charge, but can be ordered at a nominal sum by other Eclectics on the coast if considered worthy of attention and profitable for distribution. Orders should be sent before the pamphlet is printed, as these will serve as suggestion of the number needed.

A Happy Thought.—A few days before the State meeting, Professor Howe's article, "Old Times," reached the editor, and as he was too busy or too careless(?) to attend to it, the first day arrived with no preparation on the subject assigned him. While considering this point somewhat regretfully before taking train for 'Frisco in the morning, the happy thought occurred of pocketing "Old Times" and reading it to the assembly in lieu of something worse.

The subterfuge proved a capital hit, for though never an effective reader, the merit of the paper would shine, and the house was "brought down" several times.

But the best part is yet to follow. The dailies of the ensuing morning gave the reader and his paper somewhat of a flattering notice, and credited the reader with the authorship—a notice not likely to have been merited or received if the original paper contemplated in the announcement had been furnished.

Following on the head of all this the honorable position of president was thrust upon the reader the following day, another compliment doubtless due the stolen paper. All in all, it proved a most felicitous idea.

Ex-President Russell's Nuptials.—L. E. Russell, M. D., of Springfield, Ohio, ex-president of the National, was married to a young lady of the same place on Thanksgiving-day last. The doctor had been supposed to have become a confirmed bachelor, and his sudden taking off by a matrimonial alliance was a surprise to many of his most intimate friends. From quite a full account of the happening, in the Springfield *Republic-Times*, we extract the following:—

“It goes without saying that many and deep are the congratulations that are extended to Dr. and Mrs. Russell. The groom is in the front rank of eminence among the surgeons of Ohio—a genial, handsome, courteous, and successful man, who has many friends. The bride is a well-bred and worthy young lady of many charms and accomplishments, and of an old and wealthy family. No physician in Springfield has been more intimately related to the lads of the city press than Dr. Russell; and they, with others, extend the most sincere and respectful good wishes.”

EDITORIAL NOTES.

WE were in receipt of an article from Dr. R. A. Hasbrouck, of Salt Lake City, just a few hours too late for this number. It will appear next month.

DR. FEARN'S articles have attracted considerable attention in the East recently. His paper on “Leontin” has been published in a number of our Eclectic exchanges, and one of the “four leading Eclectic journals,” at least, has considered his article “Prescribing at Names” worthy of reprint.

THE last suggestion offered at the State society (by Dr. Fearn) is worthy of a note. "Let everyone in good standing join the National." The editor is in receipt of blanks for those who wish the indorsement of the society, recently forwarded by Secretary Wilder. These can be had on application by members entitled to credentials, and must bear the signatures of the president and secretary and the society seal. Move soon if you desire your paper to be in the next volume of the "Transactions."

PROFESSOR HOWE'S characteristic liberality is worthy of comment. With an extensive practice, and constant demand upon his time for literary work at home, he does not forget his neighbors. Volume 10 is the only one, we believe, since the inauguration of the JOURNAL—at least since the present editorial connection—that does not contain a contribution from his pen. It is hardly necessary to remark that we do not intend to ignore such kindness.

PROFESSOR FLINT'S caustic reference to the imaginative powers of some people as regards ability to "nose" a medical college, may not be understood by all our readers without a little explanation. The residents, or some of them, in the vicinity of our new college, have been making a hue and cry over nothing, and have been more than assisted by a sensational press—the mountain has labored and brought forth a mouse. The hatred of the ignorant and superstitious for a medical college is proverbial, and not altogether confined to our coast. As Eclectics we are often inclined to ascribe the blame to a power behind the throne. Worthington has not yet been forgotten. Professor Flint's address is worth reading.

CONSIDERABLY SWOLLEN.—One of our exchanges seems to have lost its editorial head in a maze of self-admiration. Here are some of the editor's tracks found in a single number: "The very best Eclectic medical journal published" (in small caps). "No other journal can furnish a greater array of important facts. Compare our index with others and see for yourself." "The growth of the _____ in the past year has been phenomenal." "We are receiving assurances that we have made the _____ the very best Eclectic medical journal published." "If you desire to obtain the largest amount of Eclecticism for the money, subscribe for the _____." "Hundreds of doctors tell us the _____ is absolutely at the head of Eclectic medical journalism." "Remember the _____ stands on its actual merit. Take it one

year and you will take it for life." "Other Eclectic medical journals have led in past years. The _____ leads now. So we are told by scores of life-long readers." Though small, this is evidently a very sincere admiration society, and one due our consideration if not our sympathy.

MISCELLANY.

GOVERNOR FORAKER'S private secretary announces that the Republican candidate has "peritonitis of the stomach." It is further said that Foraker gained 5,000 votes by this affliction. If he had been attacked by spinal meningitis of the heart or albuminuria of the lungs, he might have been elected.—*Times and Register*.

TO SOFTEN HARDENED EAR-WAX.—The following mixture is recommended for the softening of waxy concretions in the ears:

Acid. boric., gr. lv.

Glycerine, ʒ iss.

Aqu. destillat., ʒ iss.

This is warmed and instilled into the ear, and allowed to remain a quarter of an hour, repeating the procedure for a day or two.—*International Journal of Surgery*.

THE ORIGIN OF CANCER.—Five different theories are advanced as to origin of cancer. They may be conveniently summarized as follows: 1. A cancer is the expression of a specific condition of the blood, standing in the relation to this condition of a secretion to its gland. 2. Cancer has its origin in the general constitution, the tumor being a local manifestation. 3. Cancer is purely of local origin. 4. Cancer is produced by a certain abnormal material in the blood coming into contact with an appropriate receptive tissue, and combining with it to cause the growth. 5. Cancer is local in development, but general constitutional conditions favor its local production.—*Anti. Adul. Journal*.

ARSENIC FOR DIABETES.—Years ago, a German physician, Salowsky by name, discovered that the livers of animals poisoned by arsenic contain no glycogen, a substance which is converted into grape sugar by the action of dilute acids or ferments; and that, under such conditions, artificial diabetes cannot be produced, either by puncture of the fourth ventricle, or by curare. He

therefore suggested arsenic as a remedy for sugar in the urine; and his theory was scientifically correct, as proved to-day by its undeniable action in diabetes mellitus. The bromide of arsenic, or arsenite of bromine, introduced by Clemens, gives really valuable results; and we have ourselves realized its efficiency in several cases, without vaunting it as an actual remedy. Turkish baths and regular diet should supplement the treatment.—*Anti-Adulter. Jour.*

THE ACTION OF SALICYLATES ON THE UTERUS.—The action of the salicylates upon the uterus has been studied by Wacker (Cent. f. Gyn. 39), who made the surprising discovery that they possess the power of contracting the uterus and producing metrorrhagic and anti-dysmenorrhic effects. In two cases of pregnant rheumatics, in the second and fourth months, a dose of forty-five grains *ter die* produced abortion. In six rheumatics during child-bed the same dose increased the lochia in each case, and re-instated it in one on the twenty-eighth day. In one case the hemorrhage produced by it proved fatal. In five cases in which it was given shortly after the menstrual period, the flow returned. In thirty-three cases of dysmenorrhea and suppressed lochia, nineteen were favorably influenced.

These results are in accord with those of Labadie, Lagrave, Britt, Bucquoy, Sabatowsky, and Ballette. The fever cannot be regarded in these cases as the cause of the abortion, because it never exceeded 39.3° , and never reached the temperature of $40-41^{\circ}$ C., which, according to Kuminsky, Winckel, and Runge, kills the foetus. It is probably the hemorrhagic effect of the salicylates which has been observed in the ear and eyes, which produces the congestion and hemorrhage in the mucous lining of the uterus.

BOOK NOTICE.

GOLDEN DAYS. The most fascinating juvenile paper in America is *Golden Days*, published by James Elverson, Philadelphia, Pa.

It makes its subscribers weekly visits, which are anticipated with pleasure and enjoyed hugely by many thousands of boys all over the land. Its morals are pure, the tone being unobjectionable to the most fastidious, while the lessons imparted are such as parents generally are pleased to have their children learn.

Old boys as well as young take pleasure in its perusal. The

writer—not so old after all—takes solid comfort with *Golden Days* and a post-prandial cigar upon many an occasion.

No more profitable way of spending money for the recreation of the young than that of subscribing for *Golden Days* can be found. Boys who take no interest in literature may be won over to studious habits by such means many times.